FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

> **TEMPORARY** FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

135 2670	
OMB APPROVAL	

OMB Number: 3235-0076 Expires: October 31, 2008

Estimated average burden

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V com (T) (com to the desired and indicate shapes)	
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
2008 Convertible Promissory Note and Warrant Offering	
Timing Chaer (Cheer Con (Co) that apply). I read to the control of the control (C)	ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer (\subseteq check if this is an amendment and name has changed, and indicate change.)	08062162
Kinetix Living Corp.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
3300 First Avenue South, Suite 300, Seattle, WA 98134	206-965-8800
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices) Same	Same Prondant
Brief Description of Business PROCESSED) Section
Health and Nutrition Froducts	9 Action
Type of Business Organization OCT 2 0 2008	D WC 7 2000
Type of Business Organization ☐ 1 3 0 2008 © corporation ☐ limited partnership, already formed ☐ other (please specify	1,7000
□ business trust □ limited partnership, to be formed	'DO
THOMSON REUTE	KS Ton DB
Month Year	777
Actual or Estimated Date of Incorporation or Organization: 0 3 0 4	actual
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	
CN for Canada; FN for other foreign jurisdiction)	E
, , ,	<u> </u>

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required. A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each, state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice

SEC 1972 (9-08)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number. 1 of 9

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer,

Check Box(es) that Apr ly	☐ Promoter	⊠ Beneficial Owner	☑ Executive Officer		☐ General and/or
					Managing Partner
Full Name (Last name first, Brunner, Jamie	if individual)				
Business or Residence Add	rece (Number on	d Street City State 7in	Code)		
3300 First Avenue South, S			Code)		
Check Box(es) that Apply	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, Brunner, Meagan	if individual)				
Business or Residence Add 3300 First Avenue South, S			Code)		
Check Box(es) that Apply	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, Levitan, Dan	if individual)				
Business or Residence Add 505 Fifth Avenue South, S			Code)		
Check Box(es) that Apply	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, Schickler, Steven	if individual)				
Business or Residence Add 3300 First Avenue South, S	•		Code)		and a large and a
Check Box(es) that Apply	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, Maveron General Partner L.P.; MEP III Associates	r III LLC (Mana	ging Member); Maver	on Equity Partners II	i, L.P.; Maveror	ı III Entrepreneurs' Fund,
Business or Residence Add 505 Fifth Avenue South, S	•		Code)		
	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Check Box(es) that Apply				·	
Full Name (Last name first,	if individual)				÷
Full Name (Last name first, 317508 Alberta Ltd. Business or Residence: Add	ress (Number and		Code)		·
Full Name (Last name first, 317508 Alberta Ltd. Business or Residence: Add 9219 Strathearn Drive, Ed Check Box(es) that Apply	ress (Number and Imondton, Alber		Code)	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, 317508 Alberta Ltd. Business or Residence Add 9219 Strathearn Drive, Ed	ress (Number and Imondton, Alber	rta T6C 7E1		☐ Director	☐ General and/or Managing Partner

			•		B. II	NFORM	ATION A	BOUT C	FFERIN	G				
													Yes	<u>No</u>
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.									×					
2.	What is th	e mini n	um inves	tment that	will be a	ccepted fr	om any in	dividual?					<u>N/A</u>	
						-							<u>Yes</u>	<u>No</u>
													×	
1	or similar listed is an of the bro	remuner n associa ker or de	ration for ted perso caler. If r	solicitation n or agent	on of purc of a brok five (5) p	hasers in er or deal ersons to	connectio er register	n with sal red with th	es of secu ne SEC an	rities in the district in the	he offering a state or	ly, any commission g. If a person to be states, list the name or dealer, you may	! !	
Full Nai N/A	me (Last n	ame fil st	, if individ	lual)		-								
Busines	s or Resid	ence Add	ress (I\un	nber and S	treet, City,	State, Zip	Code)			•				
Name o	f Associate	ed Broker	r or Deale	r								<u> </u>		
States in	Which P	erson List	ted Has S	olicited or	Intends to	Solicit Pu	rchasers							
(Che	ck "All St	ates" or c	heck indiv	zidual Stati	es)								□ All:	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
(IL)	[IL]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[мі]	[MN]	[MŚ]	[MO]		
[MT] [RI]	(NE) (SC)	[NV] [SE _i]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]		
Full Na	ne (Last n	ame f rst	, if individ	lual)	74					·				
Busines	s or Resid	ence Add	ress (Nun	nber and S	treet, City,	State, Zip	Code)					•		
Name o	f Associate	ed Broker	r or E eale	r			···							
														
States in	Which Po	erson List	ted Has S	olicited or	Intends to	Solicit Pu	rchasers							
(Che	ck "All Sta	ates" or cl	heck indiv	idual State	es)					·····				States
[AL]	[AK]	[A.Z]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL] [MT]	[IL] [NE]	[IA.] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	(ME) [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[TU]	[VT]	[VA]	[WA]	[wv]	[WI]	[WY]	[PR]		
Full Nar	ne (Last n	ame first,	, if individ	lual)										
Busines	s or Resid	ence Add	ress (Nun	nber and S	treet, City,	State, Zip	Code)	, 						
Name o	f Associate	ed Bi okei	r or Deale	r						···· -				
States in	Which Po	ersor List	ted Has Se	olicited or	Intends to	Solicit Pu	rchasers							
(Chec	ck "All Sta	ites" or cl	heck: indiv	ridual State	es)								□ All :	States
(AL)	[AK]	[<i>AZ</i>]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
(IL) (MT) (RI)	[IL] [NE] [SC]	[I.A] [NV] [SD]	[XS] [NH] [XX]	[KY] [NJ] [TX]	[LA] [NM] [UT]	[ME] [NY] [VT]	[MD] [NC] [VA]	[MA] [ND] [WA]	[MI] [OH] [WV]	[MN] [OK] [WI]	[MS] [OR] [WY]	[MO] [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.) 3 of 9

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	E OF PROCEEDS	
1. Enter the aggregate offering price of securities included in this offering and the total amount already so Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square a indicate in the columns below the amounts of the securities offered for exchange and already exchange	nd	
Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	-	s
Equity		
E] Common □ Preferred		
Convertible Securities (including warrants) ¹	\$ <u>1,000,000</u>	\$350,000
Partnership Interests	\$	\$
Other (Specify))	\$ <u> </u>	\$
Total	\$ 1,000,000	\$350,000
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases or the total lines. Enter '0" if answer is "none" or "zero."	; 1	
	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	1	\$350,000
Non-accredited Investors	n/a	\$ <u>n/a</u>
Total (for filings unde Rule 504 only)	<u>n/a</u>	\$
Answer also in Appendix, Column 4, if filing under ULOE.		•
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securiti sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the fit sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		
Type of offering	Type of Security	Dollar Amount Sold
Rule 505	-	_
Regulation A		
Rule 504	·	\$
Total		\$n/a
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish a estimate and check the box to the left of the estimate.	on	
Transfer Agent's Fees		s
Printing and Engraving Costs		\$
Legal Fees	x	\$10,000
Accounting Fees		\$
Engineering Fees		\$
Sales Commissions (specify finders' fees separately)		s
Other Expenses (identify)		\$

4 of 9

10,000

¹ A warrant to purchase a variable amount of shares pursuant to the terms of the Purchase Agreement was issued in connection with this Convertible Note and Warrant Offerin 3.

b. Enter the difference between the aggregate offering price given in r	STORS, EXPENSES AN	on I and			
total expenses furnished in response to Part C – Question 4.a. This proceeds to the issuer."	ed gross		s	990,000	
5. Indicate below the amount of the adjusted gross proceeds to the issue each of the purposes shown. If the amount for any purpose is not know the box to the left of the estimate. The total of the payments list proceeds to the issuer set forth in response to Part C - Question 4.b about 1.5 proceeds to the issuer set forth in response to Part C - Question 4.b.	own, furnish an estimate an ed must equal the adjusts	id check			
		Payments to Officers, Directors & Affiliates	•	-	nents to hers
Salaries and fees.		\$	_ □	\$	
Purchase of real estate		\$	_ □	\$	
Purchase, rental o: leasing and installation of machinery and equip	ment	\$	_ □	\$	
Construction or leasing of plant buildings and facilities		\$	□	\$	
Acquisition of other businesses (including the value of securities in offering that may be used in exchange for the assets or securities or pursuant to a merger)	f another issuer	s	0	s	···-·
Repayment of indebtedness		s		\$	
Working capital		s	×	\$	990,000
Other (specify):					
		\$	_ □	s	
Column Totals		S	×	\$	_990,000
Total Payments Listed (column totals added)		<u></u>	 -	990,000	
· · · · · · · · · · · · · · · · · · ·					
D. FEDERA	L SIGNATURE				
The issuer has duly caused this notice to be signed by the undersigned		f this notice is filed	under R	ule 505, th	ne following
signature constitutes an undertaking by the issuer to furnish to the U.S. information furnished by the issuer to any non-accredited investor pursuant	Securities and Exchange	Commission, upon			
Issuer (Print or Type) Signature	- 0/11		Date		
Kinetix Living Corp.	in Schiller		Octob	er 9, 2008	j
	er (Print or Type) nd Chief Executive Office	er	•		
	-				

ATTENTION

Intentional inisstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

